Case 16-32981 Doc 1 Filed 10/17/16 Entered 10/17/16 10:32:31 Desc Main Document Page 1 of 71

| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptey Court for the | |
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | <u> </u> |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 |
| | Chapter 12 ✓ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | F | Part 1: Identify Yourself | | | | | | |
|---|----------------------------|---|--|--|--|--|--|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | | | |
| 1. Your full name | Deirdre | | | | | | | |
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport | First name | First name | | | | | | |
| | С | | | | | | | |
| | Middle name | Middle name | | | | | | |
| | Walton | | | | | | | |
| | Last name | Last name | | | | | | |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) | | | | | | |
| 2. All other names you | | | | | | | | |
| have used in the | First name | First name | | | | | | |
| last 8 years | | | | | | | | |
| Include your married or maiden names. | Middle name | Middle name | | | | | | |
| maidennames. | Last name | Last name | | | | | | |
| | First name | First name | | | | | | |
| | Middle name | Middle name | | | | | | |
| | Last name | Last name | | | | | | |
| 3. Only the last 4 digits of your | XXX - XX- 9385 | xxx - xx- | | | | | | |
| Social Security number or federal | OR | OR | | | | | | |
| Individual Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- | | | | | | |
| | | | | | | | | |

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| De | ebtor 1 Deirdre | С | Walton | Case number (if ki | nown) | |
|----|---|---|---|--------------------|---|------------------------|
| | First Name | Middle Name | Last Name | | | |
| | | About Debtor 1: | | About Deb | tor 2 (Spouse Only | / in a Joint Case): |
| 4. | Any business names and Employer | I have not used any busine | ess names or EINs. | I have no | ot used any business nam | nes or EINs. |
| | Identification Numbers (EIN) you have used in the | Business name | | Business na | ame | |
| | last 8 years | Business name | | Business na | ame | |
| | Include trade names and doing business as names | EIN | · | EIN | _ | • |
| | | EIN | | EIN | | |
| 5. | Where you live | | | If Debtor 2 li | ives at a different addr | ess: |
| | | 6320 S. Honore Street Number Street | | Number | Street | |
| | | Chicago Illinois | 60636 | | | |
| | | City State Cook | Zip Code | City | State | Zip Code |
| | | County | | County | | |
| | | • | former of former than a second beautiful. | | | |
| | | If your mailing address is diffill it in here. Note that the cour this mailing address. | | | mailing address is diffe that the court will send ar | |
| | | Number Street | | Number | Street | |
| | | 000 | 7-0-1 | | | |
| | | City State | Zip Code | City | State | Zip Code |
| 6. | Why you are choosing this | Check one: | | Check one: | | |
| | district to file for bankruptcy | Over the last 180 days bef lived in this district longer | fore filing this petition, I have than in any other district. | | last 180 days before filin his district longer than in | |
| | | I have another reason. Exp | olain. (See 28 U.S.C. §§ 1408.) | I have ar | nother reason. Explain. (S | ee 28 U.S.C. §§ 1408.) |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Debtor 1 Deirdre First Name | C Middle Name | Walton Last Name | Case number (if know | m) | |
|---|--|--|--------------------------------|--|--|
| Part 2: Tell the Court Ab | out Your Bankruptcy C | ase | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | iption of each, see <i>Notice Required</i> in page 1 and check the appropriate bo | | (b) for Individuals Filing for Bankruptcy (Form | |
| 8. How you will pay the fee | ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. | | | | |
| 9. Have you filed for bankruptcy within the last 8 years? | Ves. District District District | When When | MM / DD / YYYY | Case number Case number Case number | |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | V No. Yes. Debtor District Debtor District | <u>W</u> hen | MM / DD / YYYY MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known | |
| 11. Do you rent your residence? | ✓ No. Go to line Yes. Fill out I | obtained an eviction judgment against e 12. Initial Statement About an Eviction Jud Gruptcy petition. | | | |

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| Debtor 1 Deirdre | | C | | Walton | Case number (if kno | own) | |
|--|------------------------------------|---|---|--|---|-------------------|----------|
| First Name | aut Any Bu | | | Last Name | | | |
| 12. Are you a sole proprietor of a full- or part-tine business? A sole proprieto is a business you operate as an individual, and it a separate legal entity such as a corporation, partnership, or left you have monthan one sole proprietorship, useparate sheet | rship ou s not la LLC. | No. | | Street box to describe your siness (as defined in | State ur business: n 11 U.S.C. § 101(27A)) | Zip Code | |
| attach it to this petition. | | | Stockbroker (as | defined in 11 U.S.C ker (as defined in 11 | · ,, |) | |
| 13. Are you filing Chapter 11 of the Bankruptcy Co and are you a business debt | the dead ode open small U.S. | deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in | | | | eet, statement of | |
| For a definition small business debtor, see 11 t § 101(51D). | | No. | Bankruptcy Code. | er 11, but I am NOT | Ta small business debtor ac | | |
| Part 4: Report if | You Own or | Have A | any Hazardous Pro | operty or Any I | Property That Needs | Immediate Atter | ntion |
| 14. Do you own or any property to poses or is all to pose a threa imminent and identifiable ha to public healt | r have hat eged at of | No. Yes.\ | What is the hazard? fimmediate attention is r | | | | |
| safety? Or do yown any properthat needs immediate attention? | • | \ | Where is the property? | Number | Street | | |
| For example, do own perishable or livestock that be fed, or a buil that needs urge repairs? | goods, t must ding | | | City | State | | Zip Code |

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Debtor 1 Deirdre C Walton Case number (if known)

First Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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| Debtor 1 Deirdre | C Middle Name | | mber (if known) | | | | |
|---|--|---|---|--|--|--|--|
| Part 6: Answer These Qu | uestions for Reporting Purpo | Last Name | | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be avai | | ot property is excluded and administrative expenses are ors? | | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | | | | |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 mill \$10,000,001-\$50 m \$50,000,001-\$100 r \$100,000,001-\$500 | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion | | | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mill \$10,000,001-\$50 m \$50,000,001-\$100 r \$100,000,001-\$500 | \$1,000,000,001-\$10 billion | | | | |
| Part 7: Sign Below For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ Deirdre Walton Signature of Debtor 1 Executed on | | | | | | |

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| Debtor 1 | Deirdre | С | Walton | \ ' | | |
|--|-------------------|--|---|--|--|--|
| | First Name | Middle Name | Last Name | | | |
| you are by one If you a represe | | eligibility to proceed un the relief available und to the debtor(s) the not certify that I have no ke petition is incorrect. | der Chapter 7, 11, 12, o ler each chapter for whic ice required by 11 U.S.C | r 13 of title 11, Uch the person is 6 C. § 342(b) and, ii | that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the | |
| | o file this page. | /s/ Megan Holmes Signature of Attorney f | for Debtor | Date | 10/17/2016 MM / DD / YYYY | |
| | | Megan Holmes Printed name Semrad Law Firm Firm name 11101 S. Western Aver Street | nue | | | |
| | | Chicago City | | nois ate | 60643 Zip Code | |
| | | Contact phone | | Email address | mholmes@semradlaw.com | |
| | | | | Illino | ois | |
| | | Bar number | | Stat | te | |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------------------------|--|--|
| Debtor 1 | Deirdre | С | Walton | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) First Name | | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | |
| Case number (If known) | | | (Glate) | | |

| Check if this is ar |
|---------------------|
| amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$12,325.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$12,325.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$21,065.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$10,990.00 |
| Your total liabilities | \$32,055.00 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,848.20 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$1,448.00 |
| | |

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| Del | otor 1 | Deirdre | С | Walton | Case n | umber (if known) | | | |
|--|--|--|----------------------------|--------------------------|--------------------|----------------------------|------------|--|--|
| | | | Middle Name | Last Name | _ | | | | |
| Par | Part 4: Answer These Questions for Administrative and Statistical Records | | | | | | | | |
| 6. A | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | |
| | ✓ Yes. | | | | | | | | |
| 7. V | Vhat I | kind of debt do you have? | | | | | | | |
| | | our debts are primarily consum amily, or household purpose. 11 U.S | | | | , , | | | |
| | | our debts are not primarily consists form to the court with your other | | nothing to report on thi | s part of the form | a. Check this box and subm | nit | | |
| | | n the <i>Statement of Your Curren</i> 122A-1 Line 11; OR , Form 122B L | • | , , | onthly income fro | m Official | \$2,973.56 | | |
| 9. | Cop | by the following special categor | ies of claims from Part | 4, line 6 of Schedule | E/F: | | | | |
| | Froi | m Part 4 on Schedule E/F, copy | the following: | | | Total claim | | | |
| | 9a. I | Domestic support obligations (Cop | by line 6a.) | | | \$0.00 | | | |
| | 9b. ⁻ | Taxes and certain other debts you o | owe the government. (Co | py line 6b.) | | \$0.00 | | | |
| | 9c. (| Claims for death or personal injury | while you were intoxicate | ed. (Copy line 6c.) | | \$0.00 | | | |
| | 9d. \$ | Student loans. (Copy line 6f.) | | | | \$0.00 | | | |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | | | | | | | | | |
| | 9f. C | Debts to pension or profit-sharing p | olans, and other similar d | ebts. (Copy line 6h.) | | \$0.00 | | | |
| | 9g. ' | Total. Add lines 9a through 9f. | | | | \$0.00 | | | |

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| Fill in this inf | formation to identify your case | e: | | |
|-------------------------|--|-------------------|--|---|
| Debtor 1 | Deirdre | С | Walton | |
| | First Name | Middle N | | |
| ebtor 2 | | | | |
| Spouse, if fi | iling) First Name | Middle N | ame Last Name | |
| Jnited State | s Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| case numbe f known) | er | | | |
| Official | Form 106A/B | | | Check if this is an amended filing |
| ched | ule A/B: Prope | ertv | | 12 |
| Part 1: De | wn or have any legal or eq | ce, Building, I | Land, or Other Real Estate You any residence, building, land, or similar | |
| $\mathbf{\underline{}}$ | lo. Go to Part 2 es. Where is the property? | | | |
| 1.1 _ | treet address, if available, or | other description | What is the property? Check all that apply Single-family home Duplex or multi-unit building | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property |
| _ | | | Condominium or cooperative Manufactured or mobile home | Current value of the entire property? Current value of the portion you own? |
| N | lumber Street | | Land Investment property Timeshare | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| C | City State | Zip Code | Other | the entireties, or a file estate), it known. |
| | | | Who has an interest in the property? one. Debtor 1 only | Check if this is community property (see instructions) |
| | | | Debtor 2 only Debtor 1 and Debtor 2 only | |
| | | | At least one of the debtors and another | |
| | | | Other information you wish to add about property identification number: | out this item, such as local |

What is the property? Check all that apply.

Who has an interest in the property? Check

At least one of the debtors and another

Other information you wish to add about this item, such as local

Duplex or multi-unit building

Condominium or cooperative

Manufactured or mobile home

Single-family home

Investment property

Land

Timeshare

Debtor 1 only Debtor 2 only Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D*:

Creditors Who Have Claims Secured by Property.

Describe the nature of your ownership

interest (such as fee simple, tenancy by

the entireties, or a life estate), if known.

Check if this is community property

Current value of the

portion you own?

Current value of the

(see instructions)

entire property?

Official Form 106A/B Schedule A/B: Property page 1

property identification number:

Debtor 1 and Debtor 2 only

If you own or have more than one, list here:

Street

State

Zip Code

Street address, if available, or other description

1.2

Number

City

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| Debtor 1 | Deirdre First Name | C Middle Name | Walton Last Name | Case number | (if known) | |
|--------------------------------|---|--|---|-------------|--|---|
| 1.3Stre | et address, if available, or oth | | That is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | y. | Do not deduct secured cl the amount of any secure Creditors Who Have Cla Current value of the entire property? | • |
| Nun City | nber Street State | Zip Code | Land Investment property Timeshare Other | | Describe the nature of interest (such as fee sin the entireties, or a life of | mple, tenancy by |
| | | | The has an interest in the property? CD Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add about Debtor 2 only | | Check if this is cor (see instructions) | nmunity property |
| | | tion you own for all | operty identification number: I of your entries from Part 1, including | | | |
| Do you ov you own th | at someone else drives. If youns, trucks, tractors, sport utili | equitable interest in I lease a vehicle, also | any vehicles, whether they are registed report it on Schedule G: Executory Controlles | | | |
| 3.1 | Make Model: Year: Approximate mileage: | Nissan Altima 2013 70000 | Who has an interest in the property one. ✓ Debtor 1 only Debtor 2 only | /? Check | Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the | • |
| | Other information: 2013 Nissan Altima | | Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community propinstructions) | | entire property? \$10775.00 | portion you own? \$10775.00 |
| 3.2 | Make Model: Year: Approximate mileage: | | Who has an interest in the property one. Debtor 1 only Debtor 2 only | /? Check | | d claims on Schedule D: ims Secured by Property. |
| | Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community propinstructions) | | Current value of the entire property? | Current value of the portion you own? |

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| ebtor 1 | Deirdre First Name | C Middle Name | Walton Last Name | Case numbe | r (if known) | |
|---------|--|-------------------------|---|--|--|--|
| | | ivildale iname | | | De not deal of control | laine an anna Cara D. C |
| 3.3 | Make Madel: | | Who has an interest in the pr | operty? Check | | laims or exemptions. Put ed claims on <i>Schedule D:</i> |
| | Model: Year: | | one. Debtor 1 only | | • | aims Secured by Property |
| | Approximate mileage: | | = ' | | Ordanoro vino riavo die | anno occured by 1 reports |
| | | | Debtor 2 only Debtor 1 and Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | | · = | | entire property: | portion you own: |
| | | | At least one of the debtors ar | | | |
| | | | Check if this is community instructions) | y property (see | | |
| 3.4 | Make | | Who has an interest in the pr | operty? Check | | laims or exemptions. Put |
| | Model: | | one. | | • | ed claims on <i>Schedule D</i> : |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | aims Secured by Property |
| | Approximate mileage: | · | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | | entire property? | portion you own? |
| | | | At least one of the debtors ar | nd another | | |
| | | | Check if this is community instructions) | y property (see | | |
| Exa | tercraft, aircraft, motor ho mples: Boats, trailers, motor No Yes | s, personal watercraft, | , fishing vessels, snowmobiles, mo | torcycle accessori | es | |
| Exa | mples: Boats, trailers, motors | s, personal watercraft | , fishing vessels, snowmobiles, more Who has an interest in the prone. | · | Do not deduct secured c | laims or exemptions. Put ed claims on <i>Schedule D:</i> |
| Exa | mples: Boats, trailers, motor No Yes Make | s, personal watercraft | Who has an interest in the pr | · | Do not deduct secured c | ed claims on Schedule D: |
| Exa | mples: Boats, trailers, motor No Yes Make Model: | s, personal watercraft | Who has an interest in the prone. | · | Do not deduct secured conthe amount of any secure Creditors Who Have Cla | ed claims on Schedule D: nims Secured by Property |
| Exa | mples: Boats, trailers, motor No Yes Make Model: Year: | s, personal watercraft | Who has an interest in the prone. | · | Do not deduct secured c | ed claims on Schedule D: |
| Exa | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only | operty? Check | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: nims Secured by Propert Current value of the |
| Exa | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | operty? Check | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: nims Secured by Propert Current value of the |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) Who has an interest in the prone | operty? Check Indianother Ind | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the de | ed claims on Schedule D: nims Secured by Property Current value of the portion you own? |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors are Check if this is community instructions) Who has an interest in the prone. | operty? Check Indianother Ind | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule Daims Secured by Propert Current value of the portion you own? daims or exemptions. Put ed claims on Schedule Daims |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) Who has an interest in the prone. Debtor 1 only | operty? Check Indianother Ind | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule Daims Secured by Property Current value of the portion you own? daims or exemptions. Put ed claims on Schedule Daims |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only | operty? Check Indianother Ind | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the | ed claims on Schedule D: aims Secured by Propert Current value of the portion you own? laims or exemptions. Put ed claims on Schedule D: aims Secured by Propert Current value of the |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) Who has an interest in the prone. Debtor 1 only | operty? Check Indianother Ind | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classification Creditors Who Have Classification Creditors Credi | ed claims on Schedule D: aims Secured by Propert Current value of the portion you own? laims or exemptions. Put ed claims on Schedule D: aims Secured by Propert |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only | nd another y property (see | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the | ed claims on Schedule D: aims Secured by Property Current value of the portion you own? laims or exemptions. Put ed claims on Schedule D: aims Secured by Property Current value of the |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors are Check if this is community instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only | nd another y property (see | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the | ed claims on Schedule D: aims Secured by Propert Current value of the portion you own? laims or exemptions. Put ed claims on Schedule D: aims Secured by Propert Current value of the |

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| D | ebtor 1 | Deirdre | C | Walton | Case number (if known) | |
|----------|-----------------------------------|---------------------------------|---|-----------------------------------|------------------------------|--|
| Pa | art 3: | First Name Describe Y | Middle Name Your Personal and Househo | Last Name | | |
| | | | ave any legal or equitable | | lowing items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | _ | and furnishings liances, furniture, linens, china, kitch | enware | | |
| ✓ | Yes. D | escribe | Used Furniture | | | \$400.00 |
| | '. Elect i Exampl No | | s and radios; audio, video, stereo, ar | nd digital equipment; computers, | printers, scanners; music | |
| ✓ | Yes. D | escribe | Labtop, 2 TV's, LG Phone | | | \$900.00 |
| | Examp No | stamp, co | ue and figurines; paintings, prints, or oth in, or baseball card collections; othe | • • • • • • | | |
| Ш | Yes. D | escribe | | | | |
| | | les: Sports, ph | orts and hobbies otographic, exercise, and other hobl s; carpentry tools; musical instrumer | | es, golf clubs, skis; canoes | |
| ✓ | No | | | | | _ |
| Ш | Yes. D | escribe | | | | |
| | No | | es, shotguns, ammunition, and relat | ed equipment | | 7 |
| | 1. Clot | hes | clothes, furs, leather coats, designer | wear, shoes, accessories | | |
| Щ | No Vaa 5 | | Mr. Oldi | | | 7 |
| Y | res. L | escribe | Misc. Clothing | | | \$250.00 |
| | | • | ewelry, costume jewelry, engagemer er | nt rings, wedding rings, heirloom | jewelry, watches, gems, | |
| | Yes. D | escribe | | | | |
| | - | -farm animal: les: Dogs, cat | s s, birds, horses | | | |
| | | escribe | | | | |
| | 4. Any No | other person | al and household items you did | not already list, including any | health aids you did not list | |
| O | | escribe | | | | |
| | | | lue of all of your entries from Par number here | | _ | \$1550.00 |

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| Deb | tor 1 | Deirdre | C NACIDILA NACIONA | Walton | Case number (if known) | |
|------|---------------|---|---|--------------------------------|--|--|
| Part | 1 · | First Name Describe Your F | Middle Name Financial Assets | Last Name | | |
| | | | ny legal or equitable int | erest in any of the f | ollowing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Cash Examp | ples: Money you have No | e in your wallet, in your home, in a | | nd when you file your petition | |
| 17. | Exa | oosits of money mples: Checking, sa | | ; certificates of deposit; sha | Cash: ares in credit unions, brokerage houses, on, list each. | |
| | | 165 | | | | |
| | | | 17.1. Checking account: | Fifth Third Bank | | \$-25.00 |
| | | | 17.2. Checking account: | | | |
| | | | 17.3. Savings account: | Fifth Third Bank | | \$25.00 |
| | | | 17.4. Savings account: | | | |
| | | | 17.5. Certificates of deposit: | | | |
| | | | 17.6. Other financial account: | | | |
| | | | 17.7. Other financial account: | | | |
| | | | 17.8. Other financial account: | | | |
| | | | 17.9. Other financial account: | | | |
| 18. | | | or publicly traded stocks nvestment accounts with brokerag | e firms, money market acco | unts | - |
| | ✓ | No Yes | Institution or issuer name: | | | |
| | | | | | | |
| 19. | an I | n-publicly traded st LLC, partnership, a No Yes. Give specific | | ted and unincorporated | businesses, including an interest in % of ownership: | |
| | _ | information about them | | | | |
| | | | | | | |
| | | | | | | |

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| Debt | tor 1 | Deirdre | С | Walton | Case number (if known) | |
|------|------------|--|--|--|--------------------------------|--|
| | | First Name | Middle Name | Last Name | | |
| 20. | Neg Non | otiable instruments ir | orate bonds and other negotial include personal checks, cashiers' onts are those you cannot transfer the last are the last are those you cannot transfer the last are the last | checks, promissory notes, and mo | ney orders. | |
| 21. | Exa | irement or pension mples: Interests in IR No | accounts A, ERISA, Keogh, 401(k), 403(b), | thrift savings accounts, or other p | ension or profit-sharing plans | |
| | H | | Type of account: | Institution name: | | |
| | ш | Yes. List each account | 401(k) or similar plan: | | | |
| | | separately. | Pension plan: | | | |
| | | | IRA: | | | |
| | | | Retirement account: | | | |
| | | | Keogh: | | | |
| | | | Additional account: | | | |
| | | | Additional account: | | | |
| 22. | You Exa | | orepayments deposits you have made so that you with landlords, prepaid rent, public | | | |
| | | Yes | Electric: | | | |
| | | | Gas: | | _ | |
| | | | Heating oil: | | | |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | |
| | | | Telephone: | | | |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | Ann | uities (A contract for | a periodic payment of money to y | ou, either for life or for a number of | years) | |
| | | No Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Debt | tor 1 Deirdre First Name | C Middle N | Walton Last Name | Case number (if known) | |
|------|-------------------------------------|---|--|--|---|
| 24. | Interests in an | | ount in a qualified ABLE prograr | n, or under a qualified state tuition program | |
| | √ No | | on. Separately file the records of an | y interests.11 U.S.C. § 521(c): | |
| | _ | | | | |
| | | | | | |
| 25. | exercisable for | | roperty (other than anything list | ed in line 1), and rights or powers | |
| | ✓ No Yes. Describ | pe | | | 1 |
| | | | | | |
| 26. | | • . | ecrets, and other intellectual pro , proceeds from royalties and licens | | |
| | ✓ No | | | | 7 |
| | Yes. Describ | DE | | | |
| 27. | | hises, and other general | | gs, liquor licenses, professional licenses | |
| | ✓ No | | | ,, , , | |
| | Yes. Describ | De | | | |
| Moi | ney or proper | ty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owe | ed to you | | | |
| | ✓ No Yes. Give spe | ecific information | | Federal: | \$0.00 |
| | you alre | nem, including whether eady filed the returns | | State: | \$0.00 |
| | | tax years | | Local: | \$0.00 |
| 29. | Family support Examples: Past do | ue or lump sum alimony, spo | ousal support, child support, mainter | nance, divorce settlement, property settlement | |
| | No Voc Civo and | ecific information | | Alimony: | \$0.00 |
| | Tes. Give spe | | | Maintenance: | \$0.00 |
| | | | | Support: | \$0.00 |
| | | | | Divorce settlement: | \$0.00 |
| 20 | Other amounts (| somoono owos vou | | Property settlement: | \$0.00 |
| 30. | Examples: Unpaid | | e payments, disability benefits, sick pans you made to someone else | pay, vacation pay, workers' compensation, | |
| | ✓ No Yes. Describe | e | | | 1 |
| | .33. 2030110 | | | | |

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| Deb | tor 1 Deirdre | С | Walton | Case number (if known) | |
|------|--|--|--|--|---|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance pe Examples: Health, disabilit | | avings account (HSA); credit, ho | omeowner's, or renter's insurance | |
| | No | Cor | mpany name: | Beneficiary: | Surrender or refund value: |
| | ✓ Yes. Name the insurar of each policy and list | | e Insurance - The Catholic Char | ties | \$0.00 |
| | | | | | |
| 20 | Amy interest in presents | that is due you from som | cano viha hao diad | | |
| 32. | | | | or are currently entitled to receive | |
| | ✓ No | | | | = |
| | Yes. Describe | | | | |
| 33. | | ties, whether or not you holoyment disputes, insurance | nave filed a lawsuit or made a e claims, or rights to sue | demand for payment | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 34. | Other contingent and u | nliquidated claims of eve | ry nature, including counterc | laims of the debtor and rights | |
| | No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 35. | Any financial assets you | did not already list | | | |
| | ✓ No Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| 36. | | | rt 4, including any entries for | | |
| | | | | | |
| Part | 5 Describe Any Bu | usiness-Related Prop | erty You Own or Have a | n Interest In. List any real esta | te in Part 1. |
| 37. | | | t in any business-related prop | | |
| | ✓ No. Go to Part 6. | | | | Current value of the |
| | Yes. Go to line 38. | | | | portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or o | commissions you already | earned | | |
| | ✓ No Yes. Describe | | | | |
| | res. Describe | | | | |
| 39. | Office equipment, furnis | | dame printare coniors for most | nines, rugs, telephones, desks, chairs, ele | ctronic devices |
| | No | za computers, software, mod | ченть, риппеть, соріеть, тах macr | iii ies, rugs, telepriories, desks, criaiis, ele | CHOING DEVICES |
| | Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 | Deirdre | C | Walton | Case number (if known) | |
|-------|-------------------------|--|--|--|---|---------------------------------------|
| 40. | Mə | First Name | Middle Name | Last Name use in business, and tools of y | our trade | |
| 40. | | No | uipinent, supplies you | use in business, and tools or y | our trade | |
| | | Yes. Describe | | | | |
| | | roo. Describe | | | | |
| 44 | | | | | | |
| 41. | | entory | | | | |
| | ¥ | No | | | | 1 |
| | Ш | Yes. Describe | | | | |
| | | | | | | |
| 42. | | - | ips or joint ventures | | | |
| | $\overline{\mathbf{A}}$ | No | | Name of entity: | % of ownership: | |
| | | Yes. Give specific information about | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | | them | | - | | |
| | | | | | | |
| | | | | | | |
| 43. (| Cust | omer lists, mailing | lists, or other compilati | ions | | |
| | $\overline{\mathbf{A}}$ | No | | | | |
| | Ш | Yes. Do your lists in | clude personally identifiab | le information (as defined in 11 U | l.S.C. § 101(41A))? | |
| | | ☐ No | | | | |
| | | Yes. Descr | ribe | | | |
| 44. | Αn | v business-related p | property you did not alre | eady list | | |
| | ✓ | No | | • | | |
| | Ħ | Yes. Give specific | | | | |
| | | information | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | - | | |
| 45. A | dd t | he dollar value of a | II of your entries from P | art 5, including any entries for | pages you have attached | |
| for P | art 5 | . Write that number | here | | | |
| Part | t 6: | Describe Any F If you own or have ar | Farm- and Commeron interest in farmland, list it | cial Fishing-Related Prop in Part 1. | perty You Own or Have an Interest | t In. |
| 46. | Do | you own or have a | ny legal or equitable int | erest in any farm- or commerci | ial fishing-related property? | |
| | ✓ | No. Go to Part 7. | | | | Current value of the portion you own? |
| | | Yes. Go to line 47. | | | | Do not deduct secured |
| | | | | | | claims or exemptions |
| 47. | Far | rm animals | | | | or oxomptions |
| | | | ultry, farm-raised fish | | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | | | | | | |

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| Debt | or 1 | Deirdre | C Middle Negar | Walton | Case number (if known) | |
|--------------------|--------------|-------------------------|------------------------------------|----------------------------|------------------------------|--------------|
| 40 | C=- | First Name | Middle Name | Last Name | | |
| 48. | _ | pps-either growing | or narvested | | | |
| | \mathbf{A} | No | | | | |
| | Ш | Yes. Describe | | | | |
| | - | L | | | | |
| 49. | Far | m and fishing equip | oment, implements, machinery, fi | xtures, and tools of trade | • | |
| | V | No | | | | |
| | Ħ | Yes. Describe | | | | |
| | | | | | | |
| 50. | For | m and fiching cump | lies, chemicals, and feed | | | |
| 50. | _ | | nes, chemicais, and reed | | | |
| | | No | | | | |
| | Ш | Yes. Describe | | | | |
| | | | | | | |
| 51. | Any | y farm- and commer | cial fishing-related property you | did not already list | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | _ | L | | | | |
| | | | | | | |
| | | | of your entries from Part 6, inclu | | | |
| | | | | | L. | |
| | | | | | | |
| Part | 7. | Describe All Pro | operty You Own or Have an | Interest in That You | Did Not List Above | |
| | | | perty of any kind you did not alre | | Did Not List Above | |
| | | | , country club membership | auy not. | | |
| | ✓ | No | | | | |
| | П | Yes. Give specific | | | | |
| | | information | | | | |
| | | | | | | |
| | | | | | | |
| 54. Ad | dd th | ne dollar value of all | of your entries from Part 7. Write | that number here | > | |
| | | | | | | |
| | | | | | | |
| Part | 8: | List the Totals | of Each Part of this Form | | | |
| <i>EE</i> D | | 1. Tetal real setate I | ina 2 | | • | |
| 55. P | art | i: Total real estate, i | ine 2 | | | |
| 56. p | art 2 | 2 total vehicles, line | 5 | \$10 775 00 | | |
| _ | | | d household items, line 15 | \$10775.00 | _ | |
| | | - | | \$1550.00 | _ | |
| 58. P a | art 4 | : Total financial ass | ets, line 36 | | <u> </u> | |
| 59. P | art s | 5: Total business-re | lated property, line 45 | | | |
| 60. P | art 6 | 6: Total farm- and fi | shing-related property, line 52 | - | - | |
| 61. P | art 7 | 7: Total other prope | rty not listed, line 54 | - | _ | |
| | | | | | | |
| 62. T | otal | personal property. | Add lines 56 through 61 | \$12325.00 | Copy personal property total | + \$12325.00 |
| | | | | L | Copy personal property total | |
| | | | | | | \$12325.00 |
| ~~ - | | ot all property on So | chedule A/B. Add line 55 + line 62 | | | ı |

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| Fill in this info | Fill in this information to identify your case: | | | | | |
|---------------------------|---|-------------|------------------------------|--|--|--|
| Debtor 1 | Deirdre | С | Walton | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if fil | ing) First Name | Middle Name | Last Name | | | |
| United States | s Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | r | | (Class) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | Part 1: Identify the Property You Claim as Exempt | | | | | | |
|--|--|--|---|------------------------------------|--|--|--|
| 1. | . Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. | | | | | | |
| | You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | |
| You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| | Brief description: Life Insurance - The Catholic Charities Line from Schedule A/B: 31 | \$0.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(f) | | | |
| | Brief description: Misc. Clothing Line from Schedule A/B: 11 | \$250.00 | \$250.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes | / 3 years after that for ca | | | | | |

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| Debtor 1 | Deirdre C | | Walton | Case number (if known) | |
|----------|--|---|----------------------------------|---------------------------------------|------------------------------------|
| | | ddle Name | Last Name | | |
| Part 2: | Additional Page | | | | |
| line | of description of the property and on Schedule A/B that lists this perty | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exe | emption you claim | Specific laws that allow exemption |
| Brie | f | | _ | | 735 ILCS 5/12-1001(b) |
| des | cription: | \$400.00 | ✓ | \$400.00 | |
| | In the distribution of the | | 100% of fair ma applicable statu | rket value, up to any utory limit | - |
| Brie | f | | | | 735 ILCS 5/12-1001(b) |
| desc | cription: | (\$25.00) | ✓ | \$0 | |
| | Fifth Third Bank | | 100% of fair ma | arket value, up to any | - |
| | from edule A/B: 17 | | applicable statu | | |
| Brie | | \$25.00 | | | 735 ILCS 5/12-1001(b) |
| des | cription: | φ25.00 | ✓ | \$25.00 | _ |
| | Fifth Third Bank from edule A/B: 17 | | 100% of fair ma applicable statu | arket value, up to any utory limit | |
| Brie | | | | | 735 ILCS 5/12-1001(b) |
| | cription: | \$900.00 | ✓ | \$900.00 | |
| | Labtop, 2 TV's, LG Phone | | 100% of fair ma | urket value, up to any | - |
| | from edule A/B: 07 | | applicable state | 20019 111111 | |
| Brie | f cription: | \$10,775.00 | V | . To | 735 ILCS 5/12-1001(c) |
| | Nissan Altima, 2013, 2013 Nissan Altima | | | \$0 arket value, up to any | - |
| | | | applicable statu | utory iimit | |

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| | | | • | | | |
|------------------------|---|---|--|--|---|--------------------------------------|
| Fill in this i | nformation to identify your cas | se: | | | | |
| Debtor 1 | Deirdre | С | Walton | | | |
| 200.0. | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if | filing) First Name | Middle Name | Last Name | | | |
| United Sta | tes Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case num (If known) | ber | | | | | |
| | al Form 106D | | | I | – | Check if this is a amended filing |
| Sche | dule D: Credi | tors Who Ha | ve Claims Secur | ed by Pro | perty | 12/1 |
| and case n 1. Do a | number (if known). ny creditors have claims sec | cured by your property? this form to the court with you below. | e entries, and attach it to this forn | , , | | |
| 2. List | all secured claims. If a credit | tor has more than one secur | ed claim, list the creditor separately | Column A | Column B | Column C |
| | each claim. If more than one cr th as possible, list the claims in | • | list the other creditors in Part 2. As g to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| | SAN MOTOR ACCEPTANC ditor's Name | Describe the property t | hat secures the claim: | \$21,065.00 | \$10,775.00 | \$10,290.00 |
| Fran City Who | Box 685003 Number Street Street State ZIP Code O owes the debt? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt e debt was Intelligence | Contingent Unliquidated Disputed Nature of lien. Check al An agreement you m car loan) Statutory lien (such a | nade (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset) | | | |
| | Add the dollar value of | f vour entries in Column A | on this page. Write that | \$21.065.00 | | |

number here:

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| Fill i | n this inform | ation to identify your cas | e: | | | | | |
|---|---|--|---|---|--|--|---|--|
| Deb | tor 1 | Deirdre | С | Walton | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | tor 2 | | 8 4° 1 11 - 8 1 | | | | | |
| (Spc | ouse, ii iiiing | First Name | Middle Name | Last Name | | | | |
| Unit | ed States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Cas | e number | | | (State) | | | | |
| | nown) | | | | | | | |
| Off | icial F | orm 106E/F | | | | Ch | eck if this is ar | n amended filing |
| | | | مالا معمدال | Haya Haasa | red Claims | | | |
| <u> </u> | neau | ile E/F: Cre | editors who | Have Unsecu | ured Claims | | | 12/15 |
| party 106A that a entric know | to any exe /B) and on are listed in es in the bo /n). | cutory contracts or un Schedule G: Executor Schedule D: Creditor oxes on the left. Attach | expired leases that could y Contracts and Unexpir s Who Hold Claims Secu | ors with PRIORITY claims an I result in a claim. Also list event Leases (Official Form 106 ured by Property. If more space this page. On the top of an | ecutory contracts on Sch G). Do not include any cre ace is needed, copy the Pa | nedule A/B. editors with art you nee | : Property (On a partially sec ed, fill it out, n | fficial Form cured claims number the |
| | | | | | | | | |
| 1. | | o to Part 2. | secured claims against y | /ou <i>?</i> | | | | |
| | Yes. | 0 10 Fait 2. | | | | | | |
| 2. | _ | our priority unsecured | I claime If a creditor has n | nore than one priority unsecure | ad claim, list the creditor sen | arately for c | ach claim Fo | r each claim |
| ۷. | listed, identi much as po Continuation | ify what type of claim it is ossible, list the claims in a on Page of Part 1. If more | If a claim has both priority alphabetical order according than one creditor holds a | and nonpriority amounts, list the g to the creditor's name. If you particular claim, list the other coor this form in the instruction bo | nat claim here and show both have more than two priority reditors in Part 3. | n priority and | d nonpriority ar | mounts. As |
| | | | | | | Total claim | Priority amount | Nonpriority amount |

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| Debto | or 1 | | C | Walton | Case number (| (if known) | |
|--------|-----------|---|----------------------------|-----------------|--|------------------------------------|------------------|
| | | First Name | Middle Name | Last Nan | е | | |
| Part 2 | 2: | List All of Your NONPRIO | RITY Unsecured | Claims | | | |
| 3. | Do a | any creditors have nonpriority u | unsecured claims ag | ainst vou? | | | |
| i i | | No. You have nothing to report in | _ | - | urt with your other schedules | | |
| | # | • , | uno part. Gabrini uno ic | | it with your other sorious. | | |
| | ✓ | Yes. | | | | | |
| | | | | | er of the creditor who holds eac | | |
| | | | | | n listed, identify what type of claim in | | |
| | | • | cular claim, list the othe | er creditors in | Part 3.If you have more than four p | priority unsecured claims fill out | the Continuation |
| , | Pag | e of Part 2. | | | | | |
| | | | | | | | Total claim |
| 4.1 | | B BANK CC | | L | ast 4 digits of account number | 5444 | \$1,072.00 |
| | | onpriority Creditor's Name 50 KINGSLEY DR MD# 1MOC20 | 3 | v | hen was the debt incurred? | 2/1/2015 | |
| | | mber Street | <u> </u> | <u> </u> | | 2 1/2013 | |
| | | | | A | s of the date you file, the claim is | : Check all that apply. | |
| | <u></u> | NCINIATTI OLI- | 45000 | | Contingent | | |
| | Cit | NCINATTI Ohio v State | 45263 Zip Code | | Unliquidated | | |
| | | ho incurred the debt? Check or | | Ē | Disputed | | |
| | V | I Date to a district of the | | <u>⊢</u> | - · | l alaim. | |
| | F | Debtor 2 only | | 17 | pe of NONPRIORITY unsecured | i ciaim: | |
| | F | Debtor 1 and Debtor 2 only | | L | Student loans | | |
| | H | | an ath ar | | Obligations arising out of a sepa | | |
| | L | At least one of the debtors and a | ariotriei | _ | that you did not report as priority | | |
| | L | Check if this claim relates to | a community debt | L | Debts to pension or profit-sharin debts | g plans, and other similar | |
| | ls | the claim subject to offset? | | Ī, | - | tCard | |
| | ✓ | No | | | Other: opecity | toara | |
| | | Yes | | | | | |
| 4.2 | Ad | vocate Christ Hospital of Illinois | | | | | \$600.00 |
| L | No | npriority Creditor's Name | | | ast 4 digits of account number _ | | Ψ000.00 |
| | | 40 W 95th St | | v | hen was the debt incurred? _ | <u>n/a</u> | |
| | INU | mber Street | | А | s of the date you file, the claim is | s: Check all that apply. | |
| | | | | — ř | Contingent | | |
| | _ | | | Ė | Unliquidated | | |
| | Oa Cit | k Lawn Illinois v State | 60453 Zip Code | | = | | |
| | | ho incurred the debt? Check or | • | L | Disputed | | |
| | ~ | Debtor 1 only | | Ţ | pe of NONPRIORITY unsecured | l claim: | |
| | F | Debtor 2 only | | | Student loans | | |
| | F | Debtor 1 and Debtor 2 only | | Г | Obligations arising out of a sepa | ration agreement or divorce | |
| | H | • | nothor | | that you did not report as priority | claims | |
| | L | At least one of the debtors and a | ai iou iei | | Debts to pension or profit-sharin | g plans, and other similar | |
| | L | Check if this claim relates to | a community debt | | debts | J:I | |
| | ls : | the claim subject to offset? | | L | Other. Specify Med | dical | |
| | ∠ | No | | | | | |
| | | Yes | | | | | |
| 4.3 | Cit | y of Chicago Parking | | | | | \$135.00 |
| | No | npriority Creditor's Name | | | ast 4 digits of account number _ | | Ψ.00.00 |
| | _ | 1 N. LaSalle St # 107A Imber Street | | v | hen was the debt incurred? _ | n/a | |
| | INC | uribei Street | | Α | s of the date you file, the claim is | : Check all that apply. | |
| | | | | | Contingent | | |
| | | icago Illinois | 60602 | —— ī | Unliquidated | | |
| | Cit | y State ho incurred the debt? Check or | Zip Code | - | = | | |
| | V | I Dalatan Amaria | | L | Disputed | | |
| | Ë | Debtor 2 only | | T | pe of NONPRIORITY unsecured | I claim: | |
| | H | | | | Student loans | | |
| | \vdash | Debtor 1 and Debtor 2 only | a. | Ī | Obligations arising out of a sepa | ration agreement or divorce | |
| | | At least one of the debtors and a | another | _ | that you did not report as priority | | |
| | | Check if this claim relates to | a community debt | | Debts to pension or profit-sharin | g plans, and other similar | |
| | Is | the claim subject to offset? | | _ | debts Other Charity Tight | roto | |
| | ✓ | No | | Ŀ | Other. Specify Tick | <u>cets</u> | |
| | F | Yes | | | | | |
| | | • | | | | | |

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Walton Debtor 1 Deirdre Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim CNVRGT HTHCR** 4.4 \$784.00 Last 4 digits of account number ___ Nonpriority Creditor's Name 121 NE JÉFFERSON S SUITE 100 When was the debt incurred? 4/1/2011 Number As of the date you file, the claim is: Check all that apply. Contingent **PEORIA** Illinois 61602 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify_ **MEDICAL** Yes 4.5 Comcast \$264.00 Last 4 digits of account number Nonpriority Creditor's Name 11621 E. Marginal Way # 5 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Unliquidated Washington 98168 Seattle City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Cable Other. Specify Is the claim subject to offset? **✓** No Yes ComEd \$662.00 Last 4 digits of account number Nonpriority Creditor's Name 3 Lincokln Cetre When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. c/o Sabrina Copelan Contingent Villa Park 60181 Illinois Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify Electric **✓** No

Yes

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| Debto | | /alton Case number (if known) | |
|--------|---|---|-------------|
| | | ast Name | |
| Part 2 | Your NONPRIORITY Unsecured Claims - Contin | nuation Page | |
| | After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | DEPT OF EDUCATION/NELN | Last 4 digits of account number 2885 | \$23,770.00 |
| | Nonpriority Creditor's Name 121 S 13TH ST | <u></u> | |
| | Number Street | When was the debt incurred? 9/1/2013 | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | LINCOLN Nebraska 68508 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | ✓ Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| | Yes | | |
| 4.8 | DEPT OF EDUCATION/NELN | Last 4 digits of account number 7085 | \$22,942.00 |
| | Nonpriority Creditor's Name 121 S 13TH ST | When was the debt incurred? 9/1/2014 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | LINCOLN Nebraska 68508 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ✓ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | 片 | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | | _ | |
| | Yes | | |
| 4.9 | DEPT OF EDUCATION/NELN Nonpriority Creditor's Name | Last 4 digits of account number 8099 | \$13,384.00 |
| | 121 S 13TH ST | When was the debt incurred?10/1/2010_ | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | LINCOLN Nebraska 68508 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | |
| | Debtor 1 and Debtor 2 only | ✓ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts | |
| | ✓ No | Other. Specify | |
| | Yes | | |

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| Debtor | | Valton Case number (if known) | |
|---------|---|---|-------------|
| | First Name Middle Name La | ast Name | |
| Part 2: | Your NONPRIORITY Unsecured Claims - Contin | nuation Page | |
| | After listing any entries on this page, number them beginning | ng with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.10 | DEPT OF EDUCATION/NELN Nonpriority Creditor's Name | Last 4 digits of account number 7899 | \$9,978.00 |
| | 121 S 13TH ST | When was the debt incurred? 12/1/2009 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | LINCOLN Nebraska 68508 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 1 only Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ✓ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts Other. Specify | |
| | ✓ No | | |
| 1 | Yes | | |
| 4.11 | DEPT OF EDUCATION/NELN Nonpriority Creditor's Name | Last 4 digits of account number 3199 | \$6,261.00 |
| | 121 S 13TH ST Number Street | When was the debt incurred? 10/1/2008 | |
| | - Clock | As of the date you file, the claim is: Check all that apply. | |
| | LINCOLN Nebraska 68508 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ✓ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| 4.40 | Yes | | 00.011.55 |
| 4.12 | DEPT OF EDUCATION/NELN Nonpriority Creditor's Name | Last 4 digits of account number 7799 | \$6,211.00 |
| | 121 S 13TH ST Number Street | When was the debt incurred? 10/1/2009 | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | LINCOLN Nebraska 68508 | Contingent | |
| | City State Zip Code Who incurred the debt? Check one. | Unliquidated | |
| | Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | Yes | | |
| | 165 | | |

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| Debtor | | /alton Case number (if known) | |
|---------|---|---|-------------|
| | | st Name | |
| Part 2: | Your NONPRIORITY Unsecured Claims - Contin | nuation Page | |
| | After listing any entries on this page, number them beginning | ng with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.13 | DEPT OF EDUCATION/NELN | Last 4 digits of account number 7999 | \$2,807.00 |
| | Nonpriority Creditor's Name 121 S 13TH ST | When was the debt incurred? 10/1/2010 | |
| | Number Street | <u> </u> | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | LINCOLN Nebraska 68508 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ✓ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| | Yes | | |
| 4.14 | EDFINANCIAL SVCS Nonpriority Creditor's Name | Last 4 digits of account number5099 | \$8,982.00 |
| | 120 N. Seven Oaks | When was the debt incurred? 10/1/2007 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Knoxville Tennessee 37922 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | ✓ Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | | _ | |
| | Yes | | |
| 4.15 | FALLS COLLECTION SVC Nonpriority Creditor's Name | Last 4 digits of account number 7417 | \$69.00 |
| | PO BOX 668 | When was the debt incurred? 6/1/2014 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | CERNANITOWN Wisconsin 50000 | Contingent | |
| | GERMANTOWN Wisconsin 53022 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | 블 | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt Is the claim subject to offset? | debts | |
| | No | 001 Collection; Collecting for | |
| | Yes | ORIGINAL CREDITOR: ACL Other. Specify INC. | |

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| Debtor | | /alton Case number (if known) | |
|---------|---|---|-------------|
| | | | |
| Part 2: | Your NONPRIORITY Unsecured Claims - Contin | nuation Page | |
| | After listing any entries on this page, number them beginning | ng with 4.5 followed by 4.6, and so forth | Total claim |
| 4.40 | | ng man no, renemba by no, and so rerain | |
| 4.16 | Illinois Lending Nonpriority Creditor's Name | Last 4 digits of account number | \$1,400.00 |
| | 408 N. Wells | When was the debt incurred? n/a | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago Illinois 60610 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Ä | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debiots and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify Loan | |
| | ✓ No | • Curiot. Speeding Loan | |
| | Yes | | |
| 4.17 | JEFFERSON CAPITAL SYST | | \$1,253.00 |
| 7.17 | Nonpriority Creditor's Name | Last 4 digits of account number 4003 | Ψ1,200.00 |
| | 16 MCLELAND RD | When was the debt incurred? 3/1/2015 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | SAINT CLOUD Minnesota 56303 | | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts | |
| | No | ✓ Other. Specify 001 UnknownLoanType | |
| | | | |
| | Yes | | |
| 4.18 | Peoples Gas | Last 4 digits of account number | \$1.00 |
| | Nonpriority Creditor's Name 200 E. Randolph | When was the debt incurred? | |
| | Number Street | <u></u> | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago Illinois 60601 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | 븜 | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify Gas | |
| | Is the claim subject to offset? | <u> </u> | |
| | ✓ No | | |
| | Yes | | |

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| Debtor | | Walton Case number (if known) | |
|---------|--|--|-------------|
| | | Last Name | |
| Part 2: | Your NONPRIORITY Unsecured Claims - Conti | inuation Page | |
| | After listing any entries on this page, number them beginn | ing with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.19 | Riverside Medical Center | Loot 4 digite of account number | \$2,500.00 |
| | Nonpriority Creditor's Name | Last 4 digits of account number | |
| | 350 N Wall St Number Street | When was the debt incurred?n/a | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Kankakee Illinois 60901 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | 블 | Student loans | |
| | Debtor 2 only | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify Medical | |
| | ✓ No | | |
| | Yes | | |
| 4.20 | VERIZON WIRELESS | | \$2.100.00 |
| 1.20 | Nonpriority Creditor's Name | Last 4 digits of account number | Ψ2,100.00 |
| | PO BOX 4002 Number Street | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Acworth Georgia 30101 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Ë | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | 불 | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify Cell | |
| | ✓ No | _ | |
| | Yes | | |
| 4.21 | Wallace Dental, LTD | Last 4 digits of account number | \$150.00 |
| | Nonpriority Creditor's Name 9612 S Halsted St | When was the debt incurred? n/a | |
| | Number Street | · · · · · · · · · · · · · · · · · · · | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago Illinois 60628 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | | Obligations arising out of a separation agreement or divorce | |
| | Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify <u>Due</u> | |
| | ✓ No | | |
| | Yes | | |

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Deirdre Walton Debtor 1 Case number (if known) First Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that 6d. amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$94,335.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$10,990.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$105,325.00 6j. Total. Add lines 6f through 6i. 6j.

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| Fill in this info | ormation to identify your cas | e: | | |
|------------------------|-------------------------------|-------------|----------------------|--|
| Debtor 1 | Deirdre | С | Walton | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if fill | ing) First Name | Middle Name | Last Name | |
| United States | s Bankruptcy Court for the: | Northern | District of Illinois | |
| Case number (If known) | r | | (State) | |

Official Form 106G

| Check if this is a |
|--------------------|
| amended filing |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company | y with whom you have th | ne contract or lease | State what the contract or lease is for |
|-----|-------------------------|-------------------------|----------------------|--|
| 2.1 | Walton, Delores Name | | | Residential Lease, Other, Year to Year Lease |
| | 6320 S. Honore Stree | t | | |
| | Number | Street | | |
| | Chicago | Illinois | 60636 | |
| | City | State | Zip Code | |

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| | | _ | 1 | |
|---|---|---|--|--|
| Debtor 1 | Deirdre First Name | C Middle Name | Walton Last Name | |
| Debtor 2 | riistramo | Wildale Name | Lastivanie | |
| | filing) First Name | Middle Name | Last Name | |
| United State | es Bankruptcy Court for the: | Northern | District of Illinois | |
| Coop numb | • | | (State) | |
| Case numb (If known) | er | | | |
| | | | | Check if this is an |
| | | | | amended filing |
| <u>Officia</u> | <u>I Form 106H</u> | | | |
| Sched | ule H: Your C | odebtors | | 12/15 |
| | | | | |
| together, bo | oth are equally responsibl | e for supplying correct info | rmation. If more space is needed, copy | the Additional Page, fill it out, and number the |
| together, bo | oth are equally responsible boxes on the left. Attac | e for supplying correct info | rmation. If more space is needed, copy | |
| together, bo entries in th Answer ever 1. Do you | oth are equally responsible boxes on the left. Attacking question. | e for supplying correct info h the Additional Page to thi | rmation. If more space is needed, copy | the Additional Page, fill it out, and number the |
| together, boentries in the Answer even 1. Do you N Ye | oth are equally responsible boxes on the left. Attacking question. I have any codebtors? (If you have any codebtors?) | e for supplying correct info h the Additional Page to thi you are filing a joint case, do n | rmation. If more space is needed, copy s page. On the top of any Additional Pa | the Additional Page, fill it out, and number the ges, write your name and case number (if known). |
| together, boentries in the Answer even 1. Do you N Ye 2. Within | oth are equally responsible boxes on the left. Attacking question. I have any codebtors? (If your codebtors of the lest 8 years, have your codebtors of the last 8 years, have your codebtors.) | e for supplying correct info h the Additional Page to thi you are filing a joint case, do n | rmation. If more space is needed, copy spage. On the top of any Additional Pa ot list either spouse as a codebtor.) erty state or territory? (Community proper | the Additional Page, fill it out, and number the |
| together, boentries in the Answer even 1. Do you \[\subseteq \text{N} \\ \text{Ye} \] 2. Within | oth are equally responsible boxes on the left. Attacking question. I have any codebtors? (If your codebtors of the lest 8 years, have your codebtors of the last 8 years, have your codebtors.) | e for supplying correct info h the Additional Page to this you are filing a joint case, do n | rmation. If more space is needed, copy spage. On the top of any Additional Pa ot list either spouse as a codebtor.) erty state or territory? (Community proper | the Additional Page, fill it out, and number the ges, write your name and case number (if known). |
| together, be tentries in the Answer even 1. Do you | oth are equally responsible boxes on the left. Attacking question. I have any codebtors? (If your codebtors of the last 8 years, have you couisiana, Nevada, New Me. o. Go to line 3. | e for supplying correct info h the Additional Page to this you are filing a joint case, do n | rmation. If more space is needed, copy is page. On the top of any Additional Parameter in the space as a codebtor.) The state of the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the space is needed, copy is needed, co | the Additional Page, fill it out, and number the ges, write your name and case number (if known). |
| together, boentries in the Answer ever 1. Do you N N C Within Idaho, L N N | oth are equally responsible boxes on the left. Attacking question. I have any codebtors? (If your codebtors?) the last 8 years, have you couisiana, Nevada, New Meson. Go to line 3. es. Did your spouse, former last No | e for supplying correct info h the Additional Page to this you are filing a joint case, do no lived in a community proposico, Puerto Rico, Texas, Wash spouse, or legal equivalent live | rmation. If more space is needed, copy is page. On the top of any Additional Particle of list either spouse as a codebtor.) erty state or territory? (Community proper particle) and Wisconsin.) e with you at the time? | the Additional Page, fill it out, and number the ges, write your name and case number (if known). The second seco |
| together, be tentries in the Answer even 1. Do you | oth are equally responsible boxes on the left. Attacking question. I have any codebtors? (If your codebtors?) the last 8 years, have you couisiana, Nevada, New Meson. Go to line 3. es. Did your spouse, former last No | e for supplying correct info h the Additional Page to this you are filing a joint case, do no lived in a community proposico, Puerto Rico, Texas, Wash spouse, or legal equivalent live | rmation. If more space is needed, copy is page. On the top of any Additional Parameter in the space as a codebtor.) The state of the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the top of any Additional Parameter in the space is needed, copy is page. On the space is needed, copy is needed, co | the Additional Page, fill it out, and number the ges, write your name and case number (if known). The second seco |
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| together, be tentries in the Answer even 1. Do you | oth are equally responsible boxes on the left. Attacking question. I have any codebtors? (If your code less the last 8 years, have you couisiana, Nevada, New Me. o. Go to line 3. es. Did your spouse, former No Yes. In which community Name of your spouse, | e for supplying correct info h the Additional Page to this you are filing a joint case, do no lived in a community propoxico, Puerto Rico, Texas, Wash spouse, or legal equivalent live state or territory did you live? | rmation. If more space is needed, copy is page. On the top of any Additional Particle of list either spouse as a codebtor.) erty state or territory? (Community proper painington, and Wisconsin.) e with you at the time? Fill in the name and | the Additional Page, fill it out, and number the ges, write your name and case number (if known). The second seco |
| together, be tentries in the Answer even 1. Do you | oth are equally responsible boxes on the left. Attacking question. I have any codebtors? (If your codebtors?) The last 8 years, have you couisiana, Nevada, New Meso. Go to line 3. The last 8 years, have you couisiana, Nevada, New Meso. Go to line 3. The last 8 years, have you couisiana, Nevada, New Meso. Go to line 3. The last 8 years, have you couisiana, Nevada, New Meso. Go to line 3. The last 8 years, have you coulsiana, Nevada, New Meso. Go to line 3. The last 8 years, have you coulsiana, Nevada, New Meso. Go to line 3. The last 8 years, have you coulsiana, Nevada, New Meso. Go to line 3. The last 8 years, have you coulsiana, Nevada, New Meso. Go to line 3. The last 8 years, have you coulsiana, Nevada, New Meso. Go to line 3. The last 8 years, have you coulsiana, Nevada, New Meso. Go to line 3. The last 8 years, have you coulsiana, Nevada, New Meso. Go to line 3. The last 8 years, have you coulsiana, Nevada, New Meso. Go to line 3. The last 8 years, have you coulsiana, Nevada, New Meso. Go to line 3. | e for supplying correct info h the Additional Page to this you are filing a joint case, do no lived in a community propoxico, Puerto Rico, Texas, Wash spouse, or legal equivalent live state or territory did you live? | rmation. If more space is needed, copy is page. On the top of any Additional Particle of list either spouse as a codebtor.) erty state or territory? (Community proper painington, and Wisconsin.) e with you at the time? Fill in the name and | the Additional Page, fill it out, and number the ges, write your name and case number (if known). The second seco |
| together, be tentries in the Answer even 1. Do you | oth are equally responsible boxes on the left. Attacking question. I have any codebtors? (If your code less the last 8 years, have you couisiana, Nevada, New Me. o. Go to line 3. es. Did your spouse, former No Yes. In which community Name of your spouse, | e for supplying correct info h the Additional Page to this you are filing a joint case, do no lived in a community propoxico, Puerto Rico, Texas, Wash spouse, or legal equivalent live state or territory did you live? | rmation. If more space is needed, copy is page. On the top of any Additional Particle of list either spouse as a codebtor.) erty state or territory? (Community proper painington, and Wisconsin.) e with you at the time? Fill in the name and | the Additional Page, fill it out, and number the ges, write your name and case number (if known). orty states and territories include Arizona, California, |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

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| Fill in this | information to identif | v vour oooo: | | | | |
|--|--|---|---|-------------------|-----------------------|--|
| | information to identif | | Makes | | | |
| Debtor 1 | Deirdre First Name | C Middle Name | Walton Last Nam | ne | _ | |
| Debtor 2 | | a | 200111011 | .0 | | Check if this is: |
| (Spouse, if fili | ^{ng)} First Name | Middle Name | Last Nam | ne | _ | An amended filing |
| United States | Bankruptcy Court for the: | Northern | District of Illino | | _ | A supplement showing post-petition chapter 1 expenses as of the following date: |
| Case number (If known) | - | | (0.00) | , | _ | MM / DD / YYYY |
| Official | Form 106I | | | | | |
| Schedu | ule I: Your Inc | come | | | | 12/1 |
| include info additional | ormation about you | r spouse. If more spa ame and case numbe | ace is needed | , attach a s | separate sh | se is not filing with you, do not eet to this form. On the top of any |
| | Il in your employment | | Debtor 1 | | | Debtor 2 |
| information. If you have more than one job, | Employment status | Employed Not Employed | | | Employed Not Employed | |
| | tach a separate page with formation about additional | Occupation | | | | |
| | nployers. | Employer's name | The Catholic | atholic Charities | | |
| or | clude part time, seasonal, elf-employed work. | Employer's address | 721 N LaSalle Number Street Number Street | Number Street | | |
| | ccupation may include udent | | | | | |
| | homemaker, if it applies. | | Chicago City | Illinois State | 60654 Zip Code | City State Zip Code |
| | | How long employed there? | 5 years 8 mor | nths | | |
| Estimate m you are sepa | arated. | date you file this form. If y | - | for all employ | | the space. Include your non-filing spouse unless on on the lines below. If you need more space, For Debtor 2 or non-filing spouse |
| | | ry, and commissions (befor alculate what the monthly wag | | | \$2,983.60 | |
| 3. Estima | ate and list monthly over | time pay. | 3. | | + \$0.00 | |

Official Form 106I Schedule I: Your Income page 1

\$2,983.60

4. Calculate gross income. Add line 2 + line 3.

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| Debt | or 1 Deirdre | | | | | | |
|----------------------|---|--|---------------------|------------------------|-----------------------------------|-------|-------------------------|
| | First Name | Middle Name | Last Name | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Co | py line 4 here | | → 4. | \$2,983.60 | | | |
| 5. Lis | et all payroll deductions: | | | | | | |
| 5a | a. Tax, Medicare, and Social Se | ecurity deductions | 5a. | \$514.1 <u>8</u> | | | |
| 5b | . Mandatory contributions fo | r retirement plans | 5b. | \$0.00 | | | |
| 50 | 2. Voluntary contributions for | retirement plans | 5c. | \$0.00 | | | |
| 50 | d. Required repayments of ret | irement fund loans | 5d. | \$0.00 | | | |
| 5e | e. Insurance | | 5e. | \$78.50 | | | |
| 5f. | . Domestic support obligation | ns | 5f. | \$0.00 | | | |
| 50 | g. Union dues | | 5g | \$0.00 | | | |
| 5h | n. Other deductions. Specify: _ | | 5h. + | \$542.72 + | | | |
| 6. Ad +5h. | d the payroll deductions. Add | lines 5a + 5b + 5c + 5d + 5e +5f | + 5g 6. | \$1,135.40 | | | |
| 7. Ca | Iculate total monthly take-hor | ne pay. Subtract line 6 from line | 4. 7. <u> </u> | \$1,848.20 | | | |
| | t all other income regularly re | | | | | | |
| 8a | a. Net income from rental prop business, profession, or far | perty and from operating a moperating a perty and business showing groups | ee | | | | |
| | | ry business expenses, and the tot | | \$0.00 | | | |
| 8b | . Interest and dividends | | 8b | \$0.00 | | | |
| 80 | dependent regularly receive | | ra | | | | |
| | Include alimony, spousal suppo divorce settlement, and propert | y settlement. | 8c | \$0.00 | | | |
| | d. Unemployment compensati | on | 8d | \$0.00 | | | |
| | e. Social Security | | 8e | \$0.00 | | | |
| 8f. | assistance that you receive, suc the Supplemental Nutrition Ass subsidies | e value (if known) of any non-cash ch as food stamps (benefits under istance Program) or housing | | | | | |
| | Specify: | | 8f. | \$0.00 | | | |
| • | g. Pension or retirement incor | | 8g | \$0.00 | | | |
| | • | cify: | | \$0.00 + | - | Ì | |
| 9. Ad | d all other income Add lines 8a | a + 8b + 8c + 8d + 8e + 8f +8g + | 8h. 9 | \$0.00 | | | |
| | alculate monthly income. Add dd the entries in line 10 for Debto | line 7 + line 9. or 1 and Debtor 2 or non-filing sp | ouse | \$1,848.20 - | - | = | \$1,848.20 |
| In re | clude contributions from an unma latives. | tions to the expenses that you arried partner, members of your ho by included in lines 2-10 or amoun | ousehold, your depe | ndents, your roommates | | | |
| Sp | pecify: | | | | | 11. + | \$0.00 |
| | 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies | | | | | | \$1,848.20 |
| vv | I Grille Gariffich | e. estroduice and cidabacal curi | ary or ooraan Elak | | ., appiloo | ļ | Combined monthly income |
| 13. D | o you expect an increase or de | ecrease within the year after yo | ou file this form? | | | | |
| L | Yes. Explain: | | | | | | |

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| Debtor 1 | Deirdre | С | Walton | Case number (if known) | |
|----------|------------|-------------|-----------|------------------------|--|
| | First Name | Middle Name | Last Name | , , | |

Part 2: Give Details About Monthly Income

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|---------------------------------------|--------------|-----------------------------------|
| 5h.Other payroll deductions. Specify: | | |
| 1. Dental | \$4.08 | |
| 2. Healthcare | \$307.14 | |
| 3. Met Life Whole Life | \$134.62 | |
| 4. Metlife | \$44.76 | |
| 5. Short Term Dis | \$47.10 | |
| 6. Vision | \$5.02 | |

Official Form 106l Schedule I: Your Income page 3

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| Fill in this infor | mation to identify | your case: | | | | | |
|-------------------------------|-----------------------------------|---|---------------------------------------|-----------------------|---------------------------------------|---|----------|
| Debtor 1 | Deirdre | С | Walton | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filin | a) First Name | Middle Name | Last Name | Cr | neck if this is: | | |
| | | | | | An amended filing | 9 | |
| United States E | Bankruptcy Court | for the: Northern | District of Illinois (State) | 🗆 | A supplement sho expenses as of th | owing post-petition chap e following date: | iter 13 |
| Case number | | | (Giaic) | | expenses as or un | e following date. | |
| (If known) | | | | | MM / DD / YYYY | | |
| Official | Form 10 | 6J | | | | | |
| - | | ır Expenses | | | | | 12/15 |
| Be as complete | e and accurate a | as possible. If two married peo | ple are filing together, b | ooth are equally resp | onsible for supply | ring correct | |
| information. If | more space is n | needed, attach another sheet to | | | | | |
| | swer every quest | | | | | | |
| | cribe Your H | ousenoia | | | | | |
| 1. Is this a join | | | | | | | |
| ✓ No. Go | to line 2 | | | | | | |
| Yes. D | oes Debtor 2 liv | e in a separate household? | | | | | |
| | No | | | | | | |
| | Yes. Debtor 2 | must file Official Forms 106J-2, | Expenses for Separate H | ousehold of Debtor 2. | | | |
| 2. Do you hav | | ✓ No | | | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information each dependent | Dependent's re Debtor 1 or De | • | Dependent's age | Does dependent liv | ve |
| | penses include of people other | ✓ No | | | | | |
| than yourself an | dvour | Yes | | | | | |
| dependent | | _ | | | | | |
| Part 2: Esti | mate Your Or | ngoing Monthly Expense | s | | | | |
| | | f your bankruptcy filing date ur | | s form as a suppleme | ent in a Chapter 13 | case to report | |
| - | of a date after th | ne bankruptcy is filed. If this is | - | • • • | • | • | |
| | | th non-cash government assis | | | | Your exp | enses |
| 4. The rental | or home owner | ship expenses for your residen | • • • • • • • • • • • • • • • • • • • | e payments and | | | \$500.00 |
| | or the ground or lo | | . | o paymonto ana | | 4. | φ300.00 |
| | luded in line 4: | | | | | | |
| | state taxes | | | | | 4a | \$0.00 |
| 4b. Proper | rty, homeowner's, | or renter's insurance | | | | 4b | \$0.00 |
| 4c. Home | maintenance, repa | air, and upkeep expenses | | | | 4c | \$0.00 |
| 4d. Home | owner's association | on or condominium dues | | | | 4d. | \$0.00 |

4d.

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Walton

Case number (if known) Debtor 1 Deirdre First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$170.00 6a. 6b. Water, sewer, garbage collection \$70.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$71.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$225.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services \$25.00 10. 11. Medical and dental expenses \$42.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$150.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$145.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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| Debtor 1 | | С | Walton | Case number (if known) | | |
|------------------|-------------------------|--------------------------------------|------------------------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | Specify: | | | | 21 | \$0.00 |
| | | | | | | |
| 22. Calcu | late your monthly ex | penses. | | | | \$1,448.00 |
| 22a. A | dd lines 4 through 21. | | | | | \$0.00 |
| 22b. C | copy line 22 (monthly e | expenses for Debtor 2), if any, from | m Official Form 106J-2 | | | \$1,448.00 |
| 22c. A | dd line 22a and 22b. T | he result is your monthly expens | ses. | | 22. | |
| 23.Calcu | late your monthly ne | t income. | | | | |
| 23a. C | copy line 12 (your comb | 23a | \$1,848.20 | | | |
| 23b. C | opy your monthly expe | 23b | \$1,448.00 | | | |
| | ubtract your monthly ex | | | \$400.20 | | |
| | The result is your mont | thly net income. | | | 23c | |
| 24. Do yo | ou expect an increase | e or decrease in your expense | es within the year after yo | u file this form? | | |
| For e | vamnle do vou expect | t to finish paying for your car loar | within the year or do you ex | rnect vour | | |
| | | ase or decrease because of a m | | | | |
| ✓ N | lo | | | | | |
| | ´es | | | | | |
| _ | Explain here: | | | | | |
| | Explain nere. | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|----------------------|---|--|--|--|--|
| Debtor 1 | Deirdre | С | Walton | | | | | |
| | First Name | Middle Name | Last Name | _ | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) First Name | | Middle Name | Last Name | _ | | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | _ | | | | |
| Case number (If known) | | | (State) | - | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t1: Sign Below | | | | | | | |
|-----|--|---|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | |
| | ✓ No | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. | | | | | | | |
| × | /s/ Deirdre Walton | * | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | |
| | Date 10/17/2016 | Date | | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | | |

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| Debtor 1 | Deirdre | С | Walton |
|---|------------------|-------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if fi | ling) First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | | Northern | District of Illinois |
| Case numbe (If known) | er | | (State) |

Check if this is an amended filing

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

| Part | Part 1: Give Details About Your Marital Status and Where You Lived Before | | | | | | | | | | |
|------|---|----------------------------|------------------|---------------------------------|---|------------------|-------|------------------|-----------------------------|--|--|
| 1. | Wha | t is your curre | nt marital sta | atus? | | | | | | | |
| | | Married Not married | | | | | | | | | |
| 2. | Durir | ng the last 3 yea | ars, have yo | u lived anywhere | other than where you live r | iow? | | | | | |
| | | No Yes. List all of the | e places you l | ived in the last 3 ye | ears. Do not include where you | u live now. | | | | | |
| | ı | Debtor 1: | | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there | | |
| | | | | | | Same as Debtor 1 | | Same as Debtor 1 | | | |
| | _ | 7844 S. Ellis | | | From 01/01/2012 | | | | Erom | | |
| | 1 | Number Street | | | From <u>01/01/2012</u> | Number Street | | From | | | |
| | - | | | | To <u>06/01/2015</u> | - | | | To | | |
| | (| Chicago | Illinois | 60619 | | | | | | | |
| | (| City | State | Zip Code | | City | State | Zip Code | | | |
| | | | | | | Same as Debtor 1 | | | Same as Debtor 1 | | |
| | - | Number Street | | | From | Number Street | | | From | | |
| | | Number Street | | | To | Number Street | | | To | | |
| | = | | | | | | | | | | |
| | (| City | State | Zip Code | | City | State | Zip Code | | | |
| _ | | | | | | | | | | | |
| | | | | | ouse or legal equivalent in a Nevada, New Mexico, Puerto | | | | mmunity property states and | | |
| | d N- | | | | | | | | | | |
| | ✓ No | | ı fill out Scho | dula H. Vour Codo | btors (Official Form 106H). | | | | | | |
| | Ll re | o. Mare Suit you | u iiii out scrie | uui c i i. 1001 C008 | אנטוים (טוווטומו דטוווו וטטרו). | | | | | | |
| | | | | | | | | | | | |

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| Deb | tor 1 | | Walton | | number (if known) | |
|------|----------------------------------|---|--|---|--|--|
| | | 1 | Name Last Na | me | | |
| Part | 2: | Explain the Sources of Your | Income | | | |
| | Fill i | you have any income from employm n the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details. | ed from all jobs and all busine | esses, including part-time | | ars? |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$26792.18 | Wages,commissions,bonuses, tips☐ Operating abusiness | |
| | | or last calendar year: lanuary 1 to December 31, 2015) YYYY | Wages, commissions, bonuses, tips Operating a business | \$22111.00 | Wages, commissions, bonuses, tips Operating a business | |
| | | or the calendar year before that: lanuary 1 to December 31, 2014) YYYY | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$30000.00 | Wages, commissions, bonuses, tips Operating a business | |
| | Inclui bene case List e | you receive any other income during de income regardless of whether that incefit payments; pensions; rental income; in and you have income that you received each source and the gross income from No Yes. Fill in the details. | come is taxable. Examples of nterest; dividends; money coll together, list it only once unde | other income are alimony; chected from lawsuits; royaltieser Debtor 1. | ; and gambling and lottery winni | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | | From January 1 of current year until he date you filed for bankruptcy: | | | | |
| | | For last calendar year: January 1 to December 31, 2015) YYYY | | | | |
| | | For the calendar year before that: January 1 to December 31, 2014) YYYYY | | | | |
| | | | | | | |

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| ebtor 1 | | eirdre est Name | | C Middle Name | Walton Last Name | Case numb | er (if known) | | |
|--|---|--------------------|---------------|--------------------------------------|------------------------------|---------------------------------|-------------------------------|--------------------------------|--|
| art 3: | | | Payments \ | | efore You Filed for E | Rankruntev - | | | |
| u t J. | <u> </u> | st Gertaiii i | ayments | TOU MAUE DE | store four flied for L | Sankruptcy | | | |
| Are | eith | er Debtor 1's | or Debtor 2's | debts primari | ly consumer debts? | | | | |
| | No. | | | otor 2 has prim nily, or househol | | onsumer debts are defined | n 11 U.S.C. § 101(8) as "incu | rred by an individual | |
| | | During the 90 | days before y | ou filed for bank | kruptcy, did you pay any cre | ditor a total of \$6,425* or mo | re? | | |
| | | No. Go t | o line 7. | | | | | | |
| | Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | | | |
| * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | | | | | |
| ✓ | Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. | | | | | | | | |
| | | During the 90 | days before y | ou filed for bank | kruptcy, did you pay any cre | ditor a total of \$600 or more | ? | | |
| | ✓ No. Go to line 7. | | | | | | | | |
| Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | | | | |
| | | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for | |
| | Cre | editor's Name | | | | | | Mortgage | |
| | Nur | mber Street | | | | | | Car Credit card Loan repayment | |
| | City | y | State : | Zip Code | | | | Suppliers or vendors | |
| | | | | | | | | Other | |
| | Cre | editor's Name | | | | | | ☐ Mortgage ☐ Car | |
| | Nur | mber Street | | | | | | Credit card | |
| | _ | | | | | | | Loan repayment | |
| | City | у | State : | Zip Code | | | | Suppliers or vendors | |
| | | | | | | | | Other | |
| | Cre | editor's Name | | | | | | Mortgage | |
| | Nur | mber Street | | | | | | Car Credit card | |
| | | | | | | | | Loan repayment | |
| | City | V | State 2 | Zip Code | | | | Suppliers or vendors | |
| | ٥.٠, | , | | ,- | | | | Other | |

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| Debtor 1 | Deirdre First Name | C M | Middle Name | Walt Last N | | Case number (ii | f known) |
|-----------------------|---|--|--------------------------------|---|--|-------------------------|---|
| Insid corp agei | ders include your i porations of which | elatives; any gene you are an officer, or a business you | ral partners; director, per | relatives of any ge son in control, or o | eneral partners; par owner of 20% or mo | ore of their voting sec | no was an insider? ou are a general partner; curities; and any managing mestic support obligations, |
| ✓ | No Yes. List all paym | ents to an insider. | | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State Zip | Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State Zip | Code | | | | |
| | hin 1 year before der? | you filed for bar | ıkruptcy, dic | you make any p | payments or trans | fer any property o | n account of a debt that benefited an |
| _ | ude payments on o | lebts guaranteed o | r cosigned by | an insider. | | | |
| | | ents that benefited | an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | | | | | | Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State Zip | Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State Zip | Code | | | | |

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| Deb | tor 1 | Deirdre First Name | C | iddle Name | Walton Last Name | C | ase number <i>(if k</i> | nown) | | |
|------|-----------------------|--|------------------|-----------------|---|-----------------------|-------------------------|----------|----------------|----------------|
| Part | 4: | | | | s, and Foreclosures | s | | | | |
| 9. | With List a | in 1 year before yo | ou filed for ban | kruptcy, were y | ou a party in any lawsu | it, court actior | | | | fications, and |
| | | No Yes. Fill in the detail | S. | | | | | | | |
| | _ | | | Natu | re of the case | Court or a | igency | | Status of t | he case |
| | | Case title | | | | Court Nam | 10 | | Pendir | |
| | | Case number | | | | NumberStr | | | On app | |
| | | | | | | | | | | |
| | | Case title | | | | City | State | Zip Code | | |
| | | | | | | Court Nam | ne | | Pendir On app | • |
| | | Case number | | | | NumberStr | eet | | Conclu | ided |
| | | | | | | City | State | Zip Code | | |
| | □ | No. Go to line 11. Yes. Fill in the infor | mation below. | | Describe the prope | erty | | Date | | e of the |
| | | NISSAN MOTOR | ACCEPTANC | | 2013 Nissan Altima | 2013 Nissan Altima | | | 10/13/2016 \$0 | |
| | | Creditor's Name | | | Explain what happe | Explain what happened | | | | |
| | | P.O. Box 685003 Number Street | | | | | | | | |
| | | | | | ✓ Property was rep✓ Property was for | | | | | |
| | | Franklin | Tennessee | 37068 | Property was ga | | | | | |
| | | City | State | Zip Code | Property was att Describe the prope | | or levied. | Date | | e of the |
| | | | | | | | | | pro | perty |
| | | Creditor's Name | | | Explain what happe | aned | | | | |
| | | Number Street | | | елріані wнаснарре | Jieu - | | | | |
| | | | | | Property was rep | eclosed. | | | | |
| | | City | State | Zip Code | Property was ga | | or levied. | | | |

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| Debt | or 1 | Deirdre First Name | C Middle Name | Walton Last Name | Case number (if known) | | |
|------|----------|--|------------------|-----------------------------|---------------------------------|--------------------------|---------------------|
| 11. | | hin 90 days before you file ounts or refuse to make a | | | ank or financial institution, s | et off any amou | nts from your |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | | | | Describe the action the | creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | Last 4 digits of account nu | umber: XXXX- | | |
| | | City State | Zip Code | | | | |
| | | nin 1 year before you filed ointed receiver, a custodi | | of your property in the p | ossession of an assignee fo | or the benefit of o | creditors, a court- |
| | ✓ | No Yes | | | | | |
| Part | | List Certain Gifts an | | | | | |
| 13. | Wi | No | | ou give any gifts with a to | tal value of more than \$600 | per person? | |
| | | Yes. Fill in the details for e Gifts with a total value o per person | | Describe the gifts | | Dates you gave the gifts | Value |
| | | Person to Whom You Gave | e the Gift | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to yo | Zip Code u | | | | |
| | | Person to Whom You Gave | e the Gift | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to yo | Zip Code u | | | | |

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| Deb | tor 1 | Deirdre First Name | C Middle Name | Walton Last Name | Case number (if known | | |
|------|----------|--|---------------------------|---|------------------------------|-------------------------|------------------------|
| 14. | Wit | hin 2 years before you file | ed for bankruptcy, did | you give any gifts or contrib | outions with a total value o | f more than \$600 | to any charity? |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details for e | ach gift or contribution. | | | | |
| | | Gifts or contributions to that total more than \$60 | | Describe what you cont | tributed | Date you contributed | Value |
| | | | | | | | |
| | | Charity's Name | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | - | | | |
| Part | 6: | List Certain Losses | | | | | |
| | gam | No Yes. Fill in the details. Describe the property you how the loss occurred | ou lost and | Describe any insurance Include the amount that in pending insurance claims A/B: Property. | surance has paid. List | Date of your loss | Value of property lost |
| | | | | | | | |
| | | ut seeking bankruptcy or de any attorneys, bankrupto No Yes. Fill in the details. | | cy petition? credit counseling agencies for Description and value of | | kruptcy. Date payment | Amount of |
| | | | | transferred | | or transfer was made | payment |
| | | LAW FIRM | | Attorney's Fee - 300.00 | | 10/17/2016 | \$300.00 |
| | | Person Who Was Paid 11101 S. Western Avenue | | | | | |
| | | Number Street | | | | | |
| | | Chicago Illinois | 60643 | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Pay | ment, if Not You | | | | |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Pay | ment, if Not You | • | | | |

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| Deb | tor 1 | Deirdre | С | | ase number (if known) | | |
|-----|-------|---|-----------------------|---|--|---------------------|---------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | hin 1 year before you filed for you deal with your creditor not include any payment or trans No Yes. Fill in the details. | s or to make payments | | alf pay or transfer a | any property to any | one who promised to |
| | | res. Fill in the details. | | | | | |
| | | | | Description and value of any pro transferred | pperty | | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zin Codo | | | | |
| | | City State | Zip Code | | | | |
| | | ude both outright transfers and sfers that you have already liste No Yes. Fill in the details. | | rity (such as the granting of a securit | | | Do not include gifts and |
| | | | | Description and value of any property transferred | Describe any payments re in exchange | ceived or debts pa | Date id transfer was made |
| | | Person Who Received Trans | fer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Trans | fer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| 19. | | hin 10 years before you filed ese are often called asset-prote | | ou transfer any property to a self-s | ettled trust or simil | ar device of which | you are a beneficiary? |
| | | No Yes. Fill in the details. | | | | | |
| | Ц | 103. I III III UIG UGIAIIS. | | Description and value of the pr | operty transferred | | Date transfer was made |
| | | Name of trust | | | | | |

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| Debto | or 1 | Deirdre First Name | C Middle Name | | Walton Last Name | Case | number (if known) | | |
|--|----------|--|----------------------|---------------|---------------------|-----------------|------------------------------|---|------------------------|
| Part 8 | 3: | List Certain Financia | | ruments | | Boxes, and | d Storage Units | | |
| 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | | | |
| | ✓ | No Yes. Fill in the details. | | Last 4 | digits of account | Type of instrun | f account or | Date account was | Last balance before |
| | | | | numbe | | msuun | ion. | closed, sold, moved, or transferred | closing or transfer |
| | | Person Who Was Paid | | XXXX- | | | ecking vings | | |
| | | Number Street | | | | | ney market okerage ner | | |
| | | City State | Zip Code | | | | | | |
| | | Person Who Was Paid | | XXXX- | | | ecking vings | | |
| | | Number Street | | | | | ney market okerage | | |
| | | | | | | Oth | - | | |
| | | City State | Zip Code | | | | | | |
| | | you now have, or did you er valuables? No Yes. Fill in the details. | have within 1 year b | | iled for bankruptc | | eposit box or other dep | | |
| | | | | wno eise | e nad access to it? | | Describe the conte | nts | Do you still have it? |
| | | Name of Financial Institut | ion | Name | | | | | ☐ No ☐ Yes |
| | | Number Street | | Number | Street | | | | |
| | | City State | Zip Code | City | State | Zip Code | | | |
| 22. | Hav | e you stored property in | | ce other th | an vour home with | in 1 vear befo | ore you filed for bankr | untcv? | |
| | | No Yes. Fill in the details. | a otorago amicor pia | oo ourior uri | , ou | i you. so. | | aptoy . | |
| • | | | | Who else | had access to it? | | Describe the conte | nts | Do you still have it? |
| | | Name of Storage Facility | | Name | | | | | □ No |
| | | Number Street | | Number | Street | | | | Yes |
| | | | | City | State | Zip Code | | | |
| | | City State | Zip Code | | | | | | |

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| ebtor 1 | | Walton | | | |
|-------------------|--|--|-----------------------|--|----------------|
| | First Name Middle Name | Last Name | | | |
| rt 9: | Identify Property You Hold or Conf | trol for Someone El | se | | |
| | | | | | |
| | o you hold or control any property that some | one else owns? Include | any property you b | orrowed from, are storing for, or hold i | n trust for |
| so | omeone. | | | | |
| ./ | No No | | | | |
| F | Yes. Fill in the details. | | | | |
| <u> </u> | res. I ill ill the details. | 340 1 41 | . • | 5 " " | |
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| art 10 | Give Details About Environmenta | l Information | | | |
| or the | a number of Part 10, the following definitions and | | | | |
| Ji li le | e purpose of Part 10, the following definitions appl | у. | | | |
| | Environmental law means any federal, state, or le | | | | |
| | hazardous or toxic substances, wastes, or mater | | , 0 | • | |
| | including statutes or regulations controlling the o | cleanup of these substance | s, wastes, or materia | al. | |
| | Site means any location, facility, or property as de | efined under any environme | ntal law, whether vou | now own, operate, or utilize it | |
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| Deb | tor 1 | Deirdre | | С | Walton | Case | number (if known) | |
|------|--------------|-----------------------|-----------------|-----------------------|---------------------------------|--------------------|---------------------------------------|----------------|
| | | First Name | | Middle Name | Last Name | _ | | |
| 26 | µ | o vou boon a na-t- | in any ludie! | al or administra | ativo proceedingd-= | any onvironment | l law? Include sottlements and sade | 5 |
| 26. | Hav | e you been a party | in any judici | ai or administra | ative proceeding under | any environmenta | al law? Include settlements and order | S. |
| | ✓ | No | | | | | | |
| | П | Yes. Fill in the deta | ils. | | | | | |
| | | | | | Court or agency | | Nature of the case | Status of the |
| | | | | | ocuit of agono, | | | case |
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| | | Case Humber | | | | | | Concluded |
| | | | | | City State | Zip Code | | |
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| Part | 11: | Give Details A | bout Your | Business or | Connections to An | y Business | | |
| | | | | | | | | |
| 27. | Witl | nin 4 years before | you filed for I | bankruptcy, did | you own a business or | have any of the fo | ollowing connections to any business | s ? |
| | | | | | | | and time | |
| | | | | - | profession, or other activit | | part-time | |
| | | | | company (LLC |) or limited liability partners | ship (LLP) | | |
| | | A partner in a | partnership | | | | | |
| | | An officer, dire | ctor, or manag | ing executive of | a corporation | | | |
| | | An owner of at | least 5% of th | e voting or equity | y securities of a corporatio | n | | |
| | | | | . 5 . 10 | | | | |
| | \mathbf{A} | No. None of the abo | | | | | | |
| | Ш | Yes. Check all that | apply above ar | nd fill in the detail | s below for each business | | | |
| | | | | | Describe the natu | re of the busines | | |
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| | | | | | _ | | EIN: | |
| | | Business Name | | | | | | |
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| Debtor | | C | | Walton | Case number (if known) |
|----------|--|-----------------|-------------------|-------------------------------|--|
| | First Name | M | iddle Name | Last Name | |
| | ithin 2 years before editors, or other par | | ankruptcy, did yc | ou give a financial statemer | nt to anyone about your business? Include all financial institutions, |
| ✓ | No Yes. Fill in the detai | ils below. | | | |
| | | | | Date issued | |
| | | | | | |
| | Name | | | MM/DD/YYYY | |
| | Number Street | | | _ | |
| | rambol Guode | | | | |
| | City | State | Zip Code | _ | |
| 5 440 | 0: DI | | | | |
| Part 12 | Sign Below | | | | |
| | | | | - | nts, and I declare under penalty of perjury that the answers are |
| | | | | | cy, or obtaining money or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | | | |
| | x /s/ | Deirdre Walton | | | × |
| | | ure of Debtor 1 | | | Signature of Debtor 2 |
| | Deta | 40/47/0040 | | | Date |
| | Date | 10/17/2016 | | | |
| Did | you attach addition | nal pages to Yo | ur Statement of | Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? |
| ✓ | No | | | | |
| | Yes | | | | |
| Did | you pay or agree to | pay someone | who is not an at | torney to help you fill out b | ankruptcy forms? |
| \ | No | | | | |
| Ħ | Yes. Name of persor | 1 | | | Attach the Bankruptcy Petition Preparer's Notice, |
| | · | | | | Declaration and Signature (Official Form 110) |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

В. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case4 and other expenses of \$371.76

- 10/17/2016
- 3. Before signing this agreement, the attorney has received, \$300.00 toward the flat fee, leaving a balance due of \$3,700.00; and \$61.76 for expenses, leaving a balance due of \$4,071.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 10/17/2016 | | | |
|-----------|------------|----------------|-----------------------|-------------|
| Signed: | | | | |
| /s/ Deird | re Walton | Deviche Walton | | . \ . \ |
| | | | /s/ Megan Holmes | Magu Holles |
| Debtor(s |) | | Attorney for Debtor(s | 5) |

Do not sign if the fee amounts at top of this page are blank.

Local Bankruptcy Form 23c

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

| | | District of Illinois | | | | | | |
|-----------|--|--|-------------------|--|--|--|--|--|
| n re - | Deirdre C Walton Debtor | Case No. | known) | | | | | |
| | Debioi | • | pter 13 | | | | | |
| | DISCLOSURE OF COMPENSATION | TION OF ATTORNEY FOR DEI | BTOR | | | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 that compensation paid to me within one year before the services rendered or to be rendered on behalf of the del is as follows: | e filing of the petition in bankruptcy, or agreed to b | e paid to me, for | | | | | |
| | For legal services, I have agreed to accept | | \$4,000. | | | | | |
| | Prior to the filing of this statement I have received | | \$300. | | | | | |
| | Balance Due | | \$3,700. | | | | | |
| 2. | The source of the compensation paid to me was: | | | | | | | |
| | Debtor Other (s | specify) | | | | | | |
| 3. | The source of the compensation paid to me is: | | | | | | | |
| | Debtor Other (s | specify) | | | | | | |
| 4. | I have not agreed to share the above-disclosed commembers and associates of my law firm. | npensation with any other person unless they are | | | | | | |
| | I have agreed to share the above-disclosed compen members or associates of my law firm. A copy of the people sharing in the compensation, is attached. | he agreement, together with a list of the names of | f | | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to r a. Analysis of the debtor's financial situation, and re bankruptcy; | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; | | | | | | | |
| | c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof | | | | | | | |
| | d. Representation of the debtor in adversary proceed | d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | | | | | |
| 6. | By agreement with the debtor(s), the above-disclosed fe | ee does not include the following services: | | | | | | |
| | | | | | | | | |
| | CER | RTIFICATION | | | | | | |
| | I certify that the foregoing is a complete statement of any ne debtor(s) in this bankruptcy proceedings. | y agreement or arrangement for payment to me fo | r representation | | | | | |
| | 10/17/2016 | /s/ Megan Holmes | | | | | | |
| | Date | Signature of Attorney | | | | | | |
| | | Semrad Law Firm | | | | | | |
| | | Name of law firm | | | | | | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Walton, Deirdre C | Case No | Case No. | | | |
|--------|--|--|---------------------------------------|---------|--|--|
| | Debtor(s) | | | | | |
| | | Chapter | Chapter13 | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | |
| | The above named Debtors hereby verify th | nat the attached list of creditors is true | and correct to the best of their know | rledge. | | |
| Date: | 10/17/2016 | /s/ Walton, Deird | re C | | | |
| _ | | Walton, Deirdre (| | | | |
| | | Signature of Deb | tor | | | |

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508

NISSAN MOTOR ACCEPTANC ATT: Aimee Cobb PO Box 660366 Dallas , TX 75266

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508

EDFINANCIAL SVCS 120 N. Seven Oaks Knoxville, TN 37922

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508

JEFFERSON CAPITAL SYST PO BOX 7999 c/o Amy Payment Saint Cloud, MN 56302

5/3 BANK CC 5050 KINGSLEY DR MD# 1MOC2G CINCINATTI , OH 45263

CNVRGT HTHCR 124 Sw Adams St Ste 215 Case 16-32981 Doc 1 Filed 10/17/16 Entered 10/17/16 10:32:31 Desc Main Document Page 65 of 71

Peoria , IL 61602

FALLS COLLECTION SVC PO BOX 668 GERMANTOWN, WI 53022

VERIZON WIRELESS PO BOX 4002 Acworth , GA 30101

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park , IL 60181

Peoples Gas 200 E. Randolph Chicago , IL 60601

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

Riverside Medical Center 350 N Wall St Kankakee , IL 60901

Advocate Christ Hospital of Illinois 4440 W 95th St Oak Lawn , IL 60453

Illinois Lending 408 N. Wells Chicago , IL 60610

Wallace Dental, LTD 9612 S Halsted St Chicago , IL 60628 Case 16-32981 Doc 1 Filed 10/17/16 Entered 10/17/16 10:32:31 Desc Main Document Page 67 of 71

| Debtor 1 Deirdre First Name | | alton Cas | se number (If known) | | |
|---|--|--|----------------------|--|--|
| | estions for Reporting Purposes | or isome | | | |
| 16. What kind of debts do you have? | 16g. Are your debte primarily consumer debte? Consumer debte are defined in 11 LLS C & 101(8) as | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☐ No. | | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49☐ 50-99☐ 100-199☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$10 | 0 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| ^{20.} How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$1 | 0 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| Part 7: Sign Below | | | | | |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true a correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, of title 11, United States Code. I understand the relief available under each chapter, and I choose to proce under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ Deirdre Walton Signature of Debtor 1 | | | | |
| | Executed on10/17/2016 MM / DD / ` | YYYY | Executed on | MM / DD / YYYY | |

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| | | | 3 | |
|--|---------------------------|-----------------------------|--|--|
| Fill in this infor | mation to identify your c | ase: | | |
| Debtor 1 | Deirdre | С | Walton | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States F | Bankruptcy Court for the: | Northern | District of Illinois | |
| Office Otales L | difficulties and | HOIRIGHT | (State) | |
| Case number (If known) | | | | |
| Official | Form 106De | <u> </u> | | Check if this is an amended filing |
| Declarat | ion About an | Individual Debt | or's Schedule | S 12/15 |
| If two married | people are filing togeth | er, both are equally respor | nsible for supplying corre | ct information. |
| | 1341, 1519, and 3571. | ion with a banktapitoy out | 5 Gui (105 Gui (111 G | o \$250,000, or imprisonment for up to 20 years, or both. 18 |
| Did you p | ay or agree to pay some | eone who is NOT an attorn | ey to help you fill out bar | skruptcy forms? |
| √ No | | | | |
| Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | |
| that they | are true and correct. | e that I have read the sum | × | d with this declaration and re of Debtor 2 |
| Date 10/1 | 7/2016 /DD/YYYY | | Date <u>N</u> | 1M/DD/YYYY |

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| ebtor 1 | Deirdre | С | | Walton | Case number (if known) |
|-------------------|--|---------------|------------------|----------------------------|---|
| | First Name | Mic | Idle Name | Last Name | |
| | thin 2 years before ye editors, or other part | | nkruptcy, did y | ou give a financial state | nent to anyone about your business? Include all financial institutions |
| | No Yes. Fill in the detai | ils below. | | | |
| | | | | Date issued | |
| | Name | | | MM/DD/YYYY | <u> </u> |
| | Number Street | | | | |
| | City | State | Zip Code | | |
| art 12: | Sign Below | | | | |
| true | and correct. I under nkruptcy case can re | stand that ma | king a false sta | itement, concealing pro | ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 |
| | Date 10 | /17/2016 | | | Date |
| Did y | | | ır Statement of | Financial Affairs for Ind | viduals Filing for Bankruptcy (Official Form 107)? |
| | No Yes | | | | |
| Did y | ou pay or agree to p | ay someone v | vho is not an at | torney to help you fill ou | t bankruptcy forms? |
| V I | No | | | | |
| $\overline{\Box}$ | Yes. Name of person | | | | Attach the Bankruptcy Petition Preparer's Notice, |

Declaration, and Signature (Official Form 119).

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| Debt | or 1 Deirdre | C Middle Norma | Walton | Case number (if known) | |
|-------------------|--|--|---|--|-------------|
| | First Name | Middle Name | Last Name | and the second s | |
| 16. | Calculate the median fa | amily income that applies to | you. Follow these step | os: | |
| | 16a. Fill in the state in wh | nich you live. | Illinois | - | |
| | 16b. Fill in the number of | people in your household. | 1 | - | |
| | household | mily income for your state and a lied in the separate instructions | To fin | nd a list of applicable median income amounts, go online nay also be available at the bankruptcy clerk's office. | \$49,741.00 |
| 17. | How do the lines compa | are? | | | |
| | 17a. Line 15b is less under 11 U.S.C | than or equal to line 16c. On t c. § 1325(b)(3). Go to Part 3. I | he top of page 1 of thi Do NOT fill out <i>Calcula</i> t | s form, check box 1, <i>Disposable income is not determined tion of Disposable Income</i> (Official Form 122C-2). | |
| | U.S.C. § 1325(i | re than line 16c. On the top of b)(3). Go to Part 3 and fill ou r current monthly income from | t Calculation of Dispo | eck box 2, <i>Disposable income is determined under 11</i> sable Income (Official Form 122C-2). On line 39 of that | |
| Part | 3: Calculate Your Co | ommitment Period Under | 11 U.S.C. §1325(I | o)(4) | |
| 18. | Copy your total average | monthly income from line 1 | 1. | | \$2,973.56 |
| 19. | Deduct the marital adju | istment if it applies. If you are ir 11 U.S.C. § 1325(b)(4) allow: | e married, your spouse s you to deduct part of | is not filing with you, and you contend that calculating the your spouse's income, copy the amount from line 13. | |
| | 19a. If the marital adjustn | nent does not apply, fill in 0 on | line 19a. | | -\$0.00 |
| | 19b. Subtract line 19a f | | F. H. di | | \$2,973.56 |
| 20. | Calculate your current | monthly income for the year. | Follow these steps: | | \$2,973.56 |
| | 20a. Copy line 19b. | | | | |
| | Multiply by 12 (the r | number of months in a year). | | | x 12 |
| | 20b. The result is your cu | rrent monthly income for the y | ear for this part of the f | orm. | \$35,682.72 |
| | 20c. Copy the median far | mily income for your state and | size of household from | line 16c. | \$49,741.00 |
| 21. | How do the lines compa | | | | |
| | Line 20b is less than commitment period is | line 20c. Unless otherwise ord s 3 years. Go to Part 4. | ered by the court, on the | ne top of page 1 of this form, check box 3, The | |
| | Line 20b is more that 4, <i>The commitment</i> | n or equal to line 20c. Unless o <i>period is 5 years.</i> Go to Part 4. | therwise ordered by the | e court, on the top of page 1 of this form, check box | |
| Part | 4: Sign Below | | | | |
| | By signing here, I dec | clare under penalty of perjury th | at the information on t | his statement and in any attachments is true and correct. | |
| | ✗ /s/ Deirdre Wa | alton Devote 1 | Valton > | | |
| | Signature of Deb | tor 1 | | Signature of Debtor 2 | |
| | Date 10/17/201 MM/DD/Y | | | Date MM/DD/YYYY | |
| n. maria manarana | If you checked 17a, of If you checked 17b, fabove. | do NOT fill out or file Form 122 fill out Form 122C-2 and file it | C-2. with this form. On line | 39 of that form, copy your current monthly income from line | ı 14 |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Walton, Deirdre | · | Case No | |
|-------------------|------------------------|------------------------------|--|--------------------------------------|
| | Debtor(s) | | Chapter. | Chapter13 |
| | | VERIFICATION OF | CREDITOR MA | TRIX |
| The knowledge. | above named Debtors he | reby verify that the attache | ed list of creditors is t | rue and correct to the best of their |
| Oate: | 10/17/2016 | | /s/ Walton, Deir Walton, Deirdre Signature of De | c record c wager, |